APPLICATION DATA SHEET

Contract or Grant Numbers::

APPLICATION INFORMATION	
Application Number::	
Filing Date::	12/03/04
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of copies of CDs::	
Sequence submission?::	No
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	HIGH-THROUGHPUT METHODS AND
	SYSTEMS FOR SCREENING OF
	COMPOUNDS TO TREAT/PREVENT
	KIDNEY DISORDERS
Attorney Docket Number::	TPIP016+/WO US
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawings Sheets::	14
Small Entity?::	Yes
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	

Secrecy Order in Parent Appl.?::

APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

No

Given Name:: Douglas

Middle Name::

Family Name:: Levinson

Name Suffix::

City of Residence:: Sherborn

State or Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 111 Maple Street

City of mailing address:: Sherborn

State of mailing address:: MA

Country of mailing address:: US

Zip Code of mailing address:: 01770

APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Kurt

Middle Name::

Family Name:: Amsler

Name Suffix::

City of Residence:: Southborough

State or Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 21 Richards Road

City of mailing address:: Southborough

State of mailing address:: MA

Country of mailing address:: US

Zip Code of mailing address:: 01772

APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Matthew

Middle Name::

Family Name:: Peterson

Name Suffix::

City of Residence:: Hopkinton

State or Province of Residence:: MA

Country of Residence:: US

Street of mailing address:: 25 Downey Street

City of mailing address:: Hopkinton

State of mailing address:: MA

Country of mailing address:: US

Zip Code of mailing address:: 01748

CORRESPONDENCE INFORMATION

Correspondence Customer

Number::

Name:: Transførm Pharmaceuticals, Inc.

34846

Street of mailing address:: 29 Hartwell Avenue

City of mailing address:: Lexington

State of mailing address:: MA

Country of mailing address:: USA

Zip Code of mailing address:: 02421

Phone Number:: 781-674-7816

Fax Number:: 781-863-7208

E-Mail address::

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This Application	National Stage of	PCT/US03/17574	June 4, 2003
PCT/US03/17574	An application claiming the benefit under 35 USC 119(e)	60/385,972	June 5, 2002

FOREIGN PRIORITY INFORMATION

Country::	Application number::	Filing Date::	Priority Claimed::
			Yes or No

ASSIGNMENT INFORMATION

Assignee name::

Street of mailing address::

City of mailing address::

State of mailing address::

Country of mailing address::

Zip Code of mailing address::